Best Available

epication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							I	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			30 minus 20=		· 12			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			₩ minus 3 =		- 1			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	/
* If the difference in column 1 is less t				s than zero, enter "0" in column 2				TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column						(Column 3)		OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	/	2	=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF MI	Minus JLTIPLE DE	PENDENT	CLAIM	=		X40=		ÖR	X80=	: , · -
		4 <u>5</u>			02 1111		'	+135=		OR	+270=	.
							Α	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur		(Column 3)				•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIM	=		X40=		OR	X80=	
	TINOT PRESE	INTATION OF IN	DETIFIE DE	FENDENT	CLAIIVI		' [+135=		OR	+270=	
, ··							A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	,	(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=	, ···.		X80=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM		』 ├	+135=		OR		
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er four	nd in the app	ropriate box	cin col	umn 1.	